#### **Application Data Sheet**

#### **Application Information**

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks:: 0

Number of copies of CDs:: 0

Sequence submission?:: Paper

Computer Readable Form (CRF)::Yes

Number of copies of CRF:: 1

Title:: COMPOSITIONS ISOLATED FROM BOVINE TISSUES

AND METHODS FOR THEIR USE

Attorney Docket No.:: 11000.1068

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: None

Total Drawing Sheets:: 0

Small Entity:: No

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Patent Appl.:: No

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Great Britain

Status:: Full Capacity

Given Name:: Matthew

Middle Name::

Family Name:: Glenn

Name Suffix::

City of Residence:: Auckland

State or Province of Residence::

Country of Residence:: New Zealand

Street of mailing address:: 14 Waimarie Road

City of mailing address:: Auckland

State or Province of mailing address::

Country of mailing address:: New Zealand

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: New Zealand

Status:: Full Capacity

Given Name:: Murray R.

Middle Name::

Family Name:: Grigor

Name Suffix::

City of Residence:: Hamilton

State or Province of Residence::

Country of Residence:: New Zealand

Street of mailing address:: 59B Knighton Road

City of mailing address:: Hamilton

State or Province of mailing address::

Country of mailing address:: New Zealand

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: New Zealand

Status::

**Full Capacity** 

Given Name::

Adrian J.

Middle Name::

Family Name::

Molenaar

Name Suffix::

City of Residence::

Hamilton

State or Province of Residence::

Country of Residence::

New Zealand

Street of mailing address::

1 Wilson Street

City of mailing address::

Hamilton

State or Province of mailing address::

Country of mailing address::

New Zealand

Postal or Zip Code of mailing address:: 2001

Applicant Authority Type::

Inventor

Primary Citizenship Country::

**Great Britain** 

Status::

**Full Capacity** 

Given Name::

Stephen R.

Middle Name::

Family Name::

Davis

Name Suffix::

City of Residence::

Hamilton

State or Province of Residence::

Country of Residence::

New Zealand

Street of mailing address::

124 Rosebank Drive, RD3

City of mailing address::

Hamilton

State or Province of mailing address::

Country of mailing address::

New Zealand

Postal or Zip Code of mailing address::

### **Correspondence Information**

Correspondence Customer

20601

Phone number::

206.382.1191

Fax number::

206.382.2669

E-Mail address(es)::

annws@citylinq.com, janets@citylinq.com,

lisab@citylinq.com

## Representative Information

Representative Designation::	Registration Number::	Representative Name:: Ann W. Speckman	
Associate	31,881		
Primary	37,007	Janet Sleath	
Associate	38,457	Susan J. Friedman	
Associate	39,905	Lisa Benado	

## **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part	09/699,146	10/27/00
09/699,146	Continuation-in-part	60/162,701	10/29/99
This application	Continuation-in-part	09/644,190	08/22/00
09/644,190	Continuation-in-part	60/150,330	08/23/99

# **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

### **Assignee Information**

Assignee name::

Genesis Research and Development Corp. Ltd.

Street of mailing address:: 1 Fox Street

Parnell

City of mailing address:: Auckland

State or Province of mailing address::

Country of mailing address::

New Zealand

Postal or Zip Code of mailing address::

Assignee name::

New Zealand Pastoral Agriculture Research Institute Ltd.

Street of mailing address:: 5<sup>th</sup> Floor, Tower Block, Ruakura Research Centre

**East Street** 

City of mailing address::

Hamilton

State or Province of mailing address::

Country of mailing address::

New Zealand

Postal or Zip Code of mailing address::